



**Secretary of State
Division of Securities and Business Regulation**

INSTRUCTIONS FOR FORM C-15
REPORT AND ITEMIZED LIST OF ALL UNSERVICED PRENEED FUNERAL
CONTRACTS

PART I – GENERAL

Complete general information about the funeral home.

PART II – UNSERVICED PRENEED FUNERAL CONTRACTS

Contract Holder Name and Bank Account Number

Fill in the name of the purchaser of the contract and the number of the account in which the funds are deposited.

Depository

Fill in the name of the financial institution in which the funds are deposited.

Date of Contract

Fill in the date the contract was written.

Contract Number

Fill in the number assigned to the contract.

Total Amount of Contract

Fill in the total price of the contract including all merchandise, services, and cash advances.

Amount Paid to Date

Fill in the total amount the customer has paid on the contract as of the date of the report.

Total Amount of Deposit

Fill in the total amount on deposit including principal and any income earned.

Total (Page 1)

Fill in the totals of the appropriate columns for page 1.

Total (Page 2)

Fill in the totals of the appropriate columns for page 2 if applicable.

Total of All Pages

Fill in the totals of the appropriate columns for all pages completed. If additional pages are used beyond pages 1 and 2, include additional page totals here.

PART III - CERTIFICATION

The person signing the C-15 form certifies, under penalties of perjury, that he/she is authorized to sign the C-15 document and certifies that all required deposits have been made and the information presented in the form and any attached documentation are correct.